City of Delta Confluence Soccer Registration Form - Fall 2016

CITY OF DELTA CONFLUEN	

Please circle below if you are willing to help in the following areas:

- 1		0	
Coach	Yes	No	Maybe
Asst Coach	Yes	No	Maybe
Official	Yes	No	Maybe

	Age Division (Circle One)					
Division	DOB Between	Activity #				
U-6	1/1/2011 - 12/31/2012	401100-D				
U-8	1/1/2009 - 12/31/2010	401100-D1				
U-10	1/1/2007 - 12/31/2008	401100-D2				
U-12	1/1/2005 - 12/31/2006	401100-D3				
U-14	1/1/2003 - 12/31/2004	401100-D4				

Aleji Al Alije A	AVIETHENIAL					U-14	1/1/2003	3 - 12/31/20	04 401100
HIVANI IN MARK	IINIAUIANIH a	Are you int	erested in ga	ame day set	-up and	take-down?			
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		•		_					
		Contact Pe	rson:			hone.			
Please fill out for	m COMPLET		1			11011C			
Please IIII out Ior	III COMPLET	ELT.	J			DI		0.4-1-	Famala
						Please cii	rcle one:	Male	Female
Player:									
Address:	-					Zip:			
Email REQUIRED :						DOB:			
Please list primary	contact info								
Guardian 1:			-			Phone:			
Guardian 2:						Phone:			
Emergency Contact						Phone:			
Medical Notes:									
	-								
Allergies:	-								
Years Played:	1st 2nd	d Over 3	Over 5	Over 7					
T-shirt size: Please	circle one	YS Y	M YL	AS	AM	AL			
Fee Schedule	1			Re	egistra	ition Dec	adline:	July 31,	<u> 2016</u>
		U6-U10	\$65.00						
		U12-U14	\$70.00						
	Late Registr		\$10.00	Lat	e reaistr	ation cutoff	: August 4	. 2016	
	-ute Hegisti		720.00		<u> </u>	<u></u>		<u>, </u>	
I, the below signed a liability for any injurie Recreation Program. any damages or persoconjunction with the requirement of this re	es or damages The applicant onal injury whi Delta Recreati	which may re agrees to sav ch may result on Program.	sult to myself (e and hold har from activities Further the pa	(my child) as mless the Ci s occurring c articipant un	a result of Delta n the proderstands	of the Participa, it's officers, perty of the C	pation in the agents, or e city of Delta	City of Delta employees for which is used	in
	Parent Signatu	ıre			Da	te			